



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

---

Report Covering the Period: From: <sup>M</sup>0<sup>N</sup>1<sup>D</sup>'01<sup>Y</sup>'20<sup>Y</sup>13 To: <sup>M</sup>06<sup>N</sup>'30<sup>D</sup>'20<sup>Y</sup>13

13031130818

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2013		, 348.90
(b) Cash on Hand at Beginning of Reporting Period.....	, 408.90	
(c) Total Receipts (from Line 19).....	, 0.00	, 0.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	, 408.90	, 408.90
7. Total Disbursements (from Line 31).....	, 72.00	, 72.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	, 348.90	, 348.90
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	, 0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	, 6,127.99	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**50 State Strategy**

Report Covering the Period:

From: **01'01'2013**

To: **06'30'2013**

**I. Receipts**

**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

**000**

**000**

(ii) Unitemized .....

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

**000**

**000**

(b) Political Party Committees .....

(c) Other Political Committees

(such as PACs).....

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c) (Carry

Totals to Line 33, page 5) .....

**000**

12. Transfers From Affiliated/Other

Party Committees.....

13. All Loans Received .....

**6127.99**

**6127.99**

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

17. Other Federal Receipts

(Dividends, Interest, etc.).....

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

(b) Levin Funds (from Schedule H5) .....

(c) Total Transfers (add 18(a) and 18(b))..

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)).....▶

**6127.99**

**6127.99**

20. Total Federal Receipts

(subtract Line 18(c) from Line 19).....▶

**6127.99**

**6127.99**

13031130819

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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13031130820

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	,	,
(ii) Non-Federal Share.....	,	,
(b) Other Federal Operating Expenditures .....	72.00	72.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	72.00	72.00
22. Transfers to Affiliated/Other Party		
Committees.....	,	,
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	,	,
24. Independent Expenditures (use Schedule E) .....	,	,
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	,	,
26. Loan Repayments Made.....	,	,
27. Loans Made.....	,	,
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	,	,
(b) Political Party Committees .....	,	,
(c) Other Political Committees (such as PACs).....	,	,
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	,	,
29. Other Disbursements .....	,	,
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	,	,
(ii) "Levin" Share.....	,	,
(b) Federal Election Activity Paid Entirely With Federal Funds .....	,	,
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	,	,
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	72.00	72.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	72.00	72.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	,	,
34. Total Contribution Refunds (from Line 28(d)) .....	,	,
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	,	,
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	,	,
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	,	,
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	,	,

#200

72.00

72.00

72.00

13031130821

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 21

21b  22  23  24  25  26  
 27  28a  28b  28c  29  30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

So State Strategy

Full Name (Last, First, Middle Initial)

A. Union Bank		Date of Disbursement
Mailing Address Westgate 0114 P.O. Box 512380		01/31/2013
City Los Angeles	State CA	Zip Code 90051
Purpose of Disbursement Service Charge	Candidate Name	Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	, , 12.00
State: District:		

B. Union Bank		Date of Disbursement
Mailing Address Westgate 0114 Po Box 512380		02/28/2013
City Los Angeles	State CA	Zip Code 90051
Purpose of Disbursement Service Charge	Candidate Name	Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	, , 12.00
State: District:		

C. Union Bank		Date of Disbursement
Mailing Address Westgate 0114 Po Box 512380		03/31/2013
City Los Angeles	State CA	Zip Code 90051
Purpose of Disbursement Service Charge	Candidate Name	Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	, , 12.00
State: District:		

SUBTOTAL of Disbursements This Page (optional)..... ▶ , , \$36.00

TOTAL This Period (last page this line number only)..... ▶ , ,

13031130822

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE **7** OF **21**

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**50 State Strategy**

Full Name (Last, First, Middle Initial)

A. <b>Union Bank</b>		Date of Disbursement
Mailing Address <b>Westgate 0114 PO Box 512380</b>		<b>04 ' 30 ' 2013</b>
City <b>Los Angeles</b> State <b>CA</b> Zip Code <b>90051</b>		Amount of Each Disbursement this Period  <b>, , 12.00</b>
Purpose of Disbursement <b>Service Charge</b>		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

B. <b>Union Bank</b>		Date of Disbursement
Mailing Address <b>Westgate 0114 PO Box 512380</b>		<b>05 ' 31 ' 2013</b>
City <b>Los Angeles</b> State <b>CA</b> Zip Code <b>90051</b>		Amount of Each Disbursement this Period  <b>, , 12.00</b>
Purpose of Disbursement <b>Service Charge</b>		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

C. <b>Union Bank</b>		Date of Disbursement
Mailing Address <b>West gate 0114 PO Box 512380</b>		<b>06 ' 28 ' 2013</b>
City <b>Los Angeles</b> State <b>CA</b> Zip Code <b>90051</b>		Amount of Each Disbursement this Period  <b>, , 12.00</b>
Purpose of Disbursement <b>Service Charge</b>		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)..... ▶

**, , 36.00**

TOTAL This Period (last page this line number only)..... ▶

**, , 72.00**

13031130823

**SCHEDULE C (FEC Form 3X)**

**LOANS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE **8** OF **21**  
FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)  
**50 State Strategy**

LOAN SOURCE Full Name (Last, First, Middle Initial)  
**Robinson Communications**

Mailing Address  
**111 West Saint John St. Suite 700**

City **San Jose** State **CA** ZIP Code **95113**

Election:  
Primary  
General  
Other (specify) ▼

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
<b>3.04</b>	<b>0</b>	<b>3.04</b>

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	<b>03 26 2013</b>		<b>0.00 % (apr)</b>	. Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶ **3.04**

**TOTALS** This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

13031130824

**SCHEDULE C (FEC Form 3X)**

**LOANS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE **1** OF **21**

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

**50 State Strategy**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**Robinson Communications**

Mailing Address

**111 West Saint John St. Suite 700**

City **San Jose**

State **CA**

ZIP Code **95113**

Election:

Primary

General

Other (specify) ▼

Original Amount of Loan

**259.43**

Cumulative Payment To Date

**0**

Balance Outstanding at Close of This Period

**259.43**

TERMS

Date Incurred

**04 / 30 / 2013**

Date Due

Interest Rate

**0.00 % (apr)**

Secured:

Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶

**259.43**

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

13031130825

**SCHEDULE C (FEC Form 3X)**

**LOANS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 10 OF 21  
FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)  
**50 State Strategy**

LOAN SOURCE Full Name (Last, First, Middle Initial) <b>Robinson Communications</b>	Election: Primary General Other (specify) ▼
Mailing Address <b>111 West Saint John St. Suite 700</b>	
City <b>San Jose</b> State <b>CA</b> ZIP Code <b>95113</b>	

Original Amount of Loan <b>369 00</b>	Cumulative Payment To Date <b>0</b>	Balance Outstanding at Close of This Period <b>369.00</b>
--	--	--

TERMS	Date Incurred <b>05 02 2013</b>	Date Due	Interest Rate <b>0.00 % (apr)</b>	Secured: Yes No
-------	------------------------------------	----------	--------------------------------------	--------------------

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶	<b>369.00</b>
TOTALS This Period (last page in this line only)..... ▶	
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

13031130826

**SCHEDULE C (FEC Form 3X)**

**LOANS**

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 11 OF 21

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)  
**50 State Strategy**

LOAN SOURCE Full Name (Last, First, Middle Initial)  
**Robinson Communications**

Mailing Address  
**111 West Saint John St. Suite 700**

City **San Jose** State **CA** ZIP Code **95113**

Election:  
 Primary  
 General  
 Other (specify) ▼

Original Amount of Loan <b>259.76</b>	Cumulative Payment To Date <b>0</b>	Balance Outstanding at Close of This Period <b>259.76</b>
--	--	--

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	<b>05 19 2013</b>		<b>0.00 % (apr)</b>	Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ► **259.76**

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

13031130827

**SCHEDULE C (FEC Form 3X)**

**LOANS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 12 OF 21

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)  
50 State Strategy

LOAN SOURCE Full Name (Last, First, Middle Initial)  
Robinson Communications  
Mailing Address  
111 West Saint John St. Suite 700  
City San Jose State CA ZIP Code 95113

Election:  
Primary  
General  
Other (specify) ▼

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
<u>228.28</u>	<u>0</u>	<u>228.28</u>

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	<u>05 31 2013</u>		<u>0.00% (apr)</u>	. Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶	<u>228.28</u>
TOTALS This Period (last page in this line only)..... ▶	
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

13031130828

**SCHEDULE C (FEC Form 3X)**

**LOANS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE **13** OF **21**

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)  
**50 State Strategy**

LOAN SOURCE Full Name (Last, First, Middle Initial)  
**Robinson Communications**  
Mailing Address  
**111 West Saint John St. Suite 700**  
City **San Jose** State **CA** ZIP Code **95113**

Election:  
Primary  
General  
Other (specify) ▼

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
<b>6.99</b>	<b>0</b>	<b>6.99</b>

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	<b>06 02 2013</b>		<b>000 % (apr)</b>	. Yes . No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶

**6.99**

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

13031130829

**SCHEDULE C (FEC Form 3X)**

**LOANS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE **14** OF **21**  
FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)  
**50 State Strategy**

LOAN SOURCE Full Name (Last, First, Middle Initial)  
**Robinson Communications**  
Mailing Address  
**111 West Saint John St. Suite 700**  
City **San Jose** State **CA** ZIP Code **95113**

Election:  
Primary  
General  
Other (specify) ▾

Original Amount of Loan <b>699</b>	Cumulative Payment To Date <b>0</b>	Balance Outstanding at Close of This Period <b>6.99</b>
---------------------------------------	--	--

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	<b>06 02 2013</b>		<b>0.00 % (apr)</b>	Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ► **6.99**

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

13051130830

**SCHEDULE C (FEC Form 3X)**

**LOANS**

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 15 OF 21  
FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

50 State Strategy

LOAN SOURCE Full Name (Last, First, Middle Initial)

Robinson Communications

Election:

Primary

General

Other (specify) ▼

Mailing Address

111 West Saint John St. Suite 700

City San Jose

State CA

ZIP Code 95113

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

801.44

0

801.44

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

06 09 2013

0.00 % (apr)

Yes

No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶

801.44

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

13031130831

**SCHEDULE C (FEC Form 3X)**

**LOANS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 16 OF 21

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)  
**50 State Strategy**

LOAN SOURCE Full Name (Last, First, Middle Initial)  
**Robinson Communications**

Mailing Address  
**111 West Saint John St. Suite 700**

City **San Jose** State **CA** ZIP Code **95113**

Election:  
Primary  
General  
Other (specify) ▼

Original Amount of Loan <b>1023.18</b>	Cumulative Payment To Date <b>0</b>	Balance Outstanding at Close of This Period <b>1023.18</b>
---	--	---

TERMS

Date Incurred <b>06 14 2013</b>	Date Due	Interest Rate <b>0.00 % (apr)</b>	Secured: Yes No
------------------------------------	----------	--------------------------------------	--------------------

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ► **1023.18**

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

13031130832

**SCHEDULE C (FEC Form 3X)**

**LOANS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 17 OF 21  
FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)  
50 State Strategy

LOAN SOURCE Full Name (Last, First, Middle Initial)  
Robinson Communications

Mailing Address  
111 West Saint John St. Suite 700

City San Jose State CA ZIP Code 95113

Election:  
Primary  
General  
Other (specify) ▼

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
<u>757.64</u>	<u>0</u>	<u>757.64</u>

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	<u>06 18 2013</u>		<u>0.00</u> % (apr)	. Yes . No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... ► 757.64

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

13031130833

**SCHEDULE C (FEC Form 3X)**

**LOANS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE **16** OF **21**  
FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)  
**50 State Strategy**

LOAN SOURCE Full Name (Last, First, Middle Initial) <b>Robinson Communications</b>	Election: Primary General Other (specify) ▼
Mailing Address <b>111 West Saint John St. Suite 700</b>	
City <b>San Jose</b> State <b>CA</b> ZIP Code <b>95113</b>	

Original Amount of Loan <b>755.20</b>	Cumulative Payment To Date <b>0</b>	Balance Outstanding at Close of This Period <b>755.20</b>
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<b>TERMS</b>	Date Incurred <b>06 22 2013</b>	Date Due	Interest Rate <b>0.00 % (apr)</b>	Secured: Yes No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

<b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<b>755.20</b>
<b>TOTALS</b> This Period (last page in this line only)..... ▶	
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

13051130834

**SCHEDULE C (FEC Form 3X)**

**LOANS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 19 OF 21

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)  
50 State Strategy

LOAN SOURCE Full Name (Last, First, Middle Initial) <u>Robinson Communications</u>	Election: Primary General Other (specify) <input type="checkbox"/>
Mailing Address <u>111 West Saint John St. Suite 700</u>	
City <u>San Jose</u> State <u>CA</u> ZIP Code <u>95113</u>	

Original Amount of Loan <u>764.24</u>	Cumulative Payment To Date	Balance Outstanding at Close of This Period <u>764.24</u>
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TERMS	Date Incurred <u>06 25 2013</u>	Date Due	Interest Rate <u>0.00</u> % (apr)	Secured: Yes No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶	<u>764.24</u>
TOTALS This Period (last page in this line only)..... ▶	
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

1303113035

**SCHEDULE C (FEC Form 3X)**

**LOANS**

Use separate schedule(s) for each category of the Detailed Summary Page  
 PAGE 20 OF 21  
 FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)  
 50 State Strategy

LOAN SOURCE Full Name (Last, First, Middle Initial)  
 Robinson Communications

Mailing Address  
 111 West Saint John St. Suite 700

City San Jose State CA ZIP Code 95113

Election:  
 Primary  
 General  
 Other (specify) ▼

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period

751.21 751.21

TERMS Date Incurred Date Due Interest Rate Secured:

06 29 2013 0.00 % (apr) . Yes . No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶ 751.21

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

13031130836

**SCHEDULE C (FEC Form 3X)**

**LOANS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 21 OF 21

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

50 State Strategy

LOAN SOURCE Full Name (Last, First, Middle Initial)

Robinson Communications

Election:

Primary

General

Other (specify) ▼

Mailing Address

111 West Saint John St. Suite 700

City San Jose

State CA ZIP Code 95113

Original Amount of Loan

141.59

Cumulative Payment To Date

0

Balance Outstanding at Close of This Period

141.59

TERMS

Date Incurred

06 30 2013

Date Due

Interest Rate

Secured:

% (apr)

Yes

No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶

141.59

TOTALS This Period (last page in this line only)..... ▶

6127.99

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

13031130837



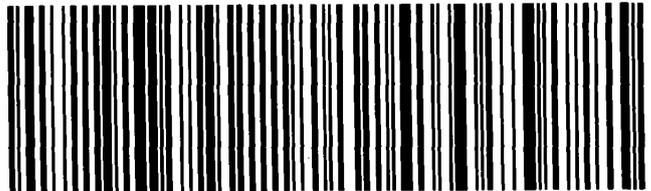
RT 677 6  
FZ  
7907  
10.11  
Express

FedEx  
TRK# 8040 9636 7907  
0215

FRI - 11 OCT 10:30A  
PRIORITY OVERNIGHT

20463  
DC-US  
IAD

XC RDVA



FTD 117510 10OCT13 RHVA 51AC1/AB1B/65DD

FedEx Package Express US Airbill

FedEx Tracking Number 8040 9636 7907

Form ID No. 0215

Recipients Co

1 From  
Date 10/9/13  
Sender's Name Richard Robinson Phone 408 217-8107  
Company ROBINSON COMMUNICATION INC.  
Address 111 W SAINT JOHN ST STE 700  
City SAN JOSE State CA ZIP 95113-1106

4 Express Package Service \*To most locations.  
NOTE: Service order has changed. Please select carefully. Packages up to 150 lb. For packages over 150 lbs., use 1 FedEx Express Freight US AIR

Next Business Day  
 FedEx First Overnight  
 FedEx Priority Overnight  
 FedEx Standard Overnight  
2 or 3 Business Days  
 FedEx 2Day A.M.  
 FedEx 2Day  
 FedEx Express Saver

2 Your Internal Billing Reference  
3 To Recipient's Name Federal Election Commission  
Company FEC  
Address 999 E. Street N.W.  
City Washington State D.C. ZIP 20463

5 Packaging \*Declare value limit \$500.  
 FedEx Envelope\*  FedEx Pak\*  FedEx Box  FedEx Tube  Other

6 Special Handling and Delivery Signature Options  
 SATURDAY Delivery  
 No Signature Required  
 Direct Signature  
 Indirect Signature  
Does this shipment contain dangerous goods?  
 No  Yes  Yes  
7 Payment Bill to:  
 Sender  Recipient  Third Party  Credit Card  Cash/Che

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Total Packages 1 Total Weight 0.25 lbs. Credit Card Auth. 677

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13031750838

Ther

Federal Election Commission  
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Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): *Fed Exp* Shipping Date  
*10/9/13*  
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

*Jm/p*  
 PREPARER

*10/18/13*  
 DATE PREPARED

13031130839